

Area 5, Central Texas
HMAZ—South IH-35 Corridor
 Tab 7 – Intervention Selection Form

Subpopulation: IDU WHITE FEMALE FMS WHITE WOMEN
 IDU AFRICAN AMERICAN FEMALE
 IDU HISPANIC FEMALE

RANKING: H

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| Name of Intervention | REAL AIDS PREVENTION PROJECT (RAPP) (C -13) |
| Risk Behavior(s) | Unprotected sex Multiple partners |
| Influencing Factor(s) or FIBs | Self esteem Self efficacy Environmental facilitation (access to condoms) Communication and negotiation skills |
| Intended Immediate Outcomes | Modify attitudes and beliefs about condom use Increase condom use Decrease partners |
| Type | CLI |
| Setting | Street, business, agencies, meeting places, residential |
| Is this intervention currently being provided in your planning area? | No |
| Rationale for selecting this intervention: | To reduce rated of HIV infection by reducing partners and increasing condom use |

Area 5, Central Texas
HMAZ—South IH-35 Corridor
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Subpopulation: FMS ANGLO WOMEN
 FMS HISPANIC WOMEN
 FMS AFRICAN AMERICAN WOMEN

RANKING: M

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|--|---|
| Name of Intervention | Enhancing motivation to reduce risk HIV infection for economically disadvantaged urban women (Fact sheet Pg. 26) |
| Risk Behavior(s) | Unprotected sex Multiple partners |
| Influencing Factor(s) or FIBs | Social learning Peer Pressure Perceived severity Self efficacy Self esteem Intention |
| Intended Immediate Outcomes | Increase condom use Decrease partners |
| Type | Group level |
| Setting | Small group- Inner-city clinics |
| Is this intervention currently being provided in your planning area? | Yes |
| Rationale for selecting this intervention: | To reduce risk of exposure to HIV and decrease STD exposure |

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SUBPOPULATION: FMS AFRICAN AMERICAN WOMEN
 FMS HISPANIC WOMEN
 FMS WHITE WOMEN

RANKING: H

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| Name of Intervention . | Context framing to enhance HIV antibody testing messages targeted to AA women (pg 33) |
| Risk Behavior(s) | Not getting tested Unprotected sex |
| Influencing Factor(s) or FIBs | Perceived susceptibility Perceived severity Peer pressure Substance use Intentions Cultural and group norms |
| Intended Immediate Outcomes | Increase awareness of personal risk Encourage communication about condom use and AIDS with partners and friends |
| Type | GLI (groups of 2-5) |
| Setting | Urban women's health and reproductive care clinic |
| Is this intervention currently being provided in your planning area? | Partial |
| Rationale for selecting this intervention: | Increased infection rate identified in epi-data Reported unsafe behaviors and reluctance to test in needs assessment |

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Subpopulation: FMS AFRICAN AMERICAN MEN
 FMS HISPANIC MEN
 FMS WHITE MEN
 FMS AFRICAN AMERICAN WOMEN
 FMS HISPANIC WOMEN
 FMS WHITE WOMEN

RANKING: H

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|--|---|
| Name of Intervention | HIV sexual risk reduction in homeless men with mental illness |
| Risk Behavior(s) | Multiple sex partners Unprotected sex |
| Influencing Factor(s) or FIBs | Self esteem Self efficacy Perceived susceptibility Perceived severity Substance use Environmental facilitators (access to condoms) Group norms Intentions Peer pressure |
| Intended Immediate Outcomes | Decrease number of sex partners Increase condom use |
| Type | GLI |
| Setting | Homeless shelters and street outreach |
| Is this intervention currently being provided in your planning area? | No |
| Rationale for selecting this intervention: | Reduced high-risk sex partners Reduced number of sex partners Increased condom use for oral, vaginal and anal sex |

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Subpopulation: FMS WHITE WOMEN
 FMS HISPANIC WOMEN
 FMS AFRICAN AMERICAN WOMEN
 All Ages, HIV negative and positive individuals

RANKING: H

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| Name of Intervention | Project Light (Pg. 43 fact sheet) |
| Risk Behavior(s) | Unprotected sex Sex with multiple partners Sex with IDU partners |
| Influencing Factor(s) or FIBs | Improve perceived susceptibility of risk Improved self-efficacy Communicate, negotiate and implement skills building for risk reduction behaviors Discuss relationships Substance use Cultural and group norms |
| Intended Immediate Outcomes | To acquire new knowledge and risk reduction skills To rehearse new behavioral patterns To build group norms to support safer sex/safer drug using efforts To practice new behaviors with a social group of persons with similar life experiences and social demographical backgrounds |
| Type | Group level intervention |
| Setting | CBO'S, STD'S clinics, Community centers, drug treatment centers |
| Is this intervention currently being provided in your planning area? | Yes |
| Rationale for selecting this intervention: | Significantly reduce unprotected intercourse and help to increase condom usage, increased percent of reported condom use or abstinence. Intervention participants reported significantly fewer STD symptoms at follow-up when conducted at STD clinics |

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|---|----------------------------|
| Subpopulation: FMS AFRICAN AMERICAN MEN | IDU AFRICAN AMERICAN MEN |
| FMS HISPANIC MEN | IDU HISPANIC MEN |
| FMS WHITE MEN | IDU WHITE MEN |
| FMS AFRICAN AMERICAN WOMEN | IDU AFRICAN AMERICAN WOMEN |
| FMS HISPANIC WOMEN | IDU HISPANIC WOMEN |
| FMS WHITE WOMEN | IDU WHITE WOMEN |

RANKING: H

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| Name of Intervention PG. 1-7 | REDUCTIONS IN HIV RISK AMOUNG RUNAWAY YOUTH (STREET SMART) (C-23 COMP) |
| Risk Behavior(s) | UNPROTECTED SEX SUBSTANCE USE |
| Influencing Factor(s) or FIBs | PERCEIVED SUSCEPTIBILITY SELF-EFFICACY EXPECTED OUTCOMES SEXUAL AROUSAL DRUG INDUCED AROUSAL GROUP NORMS PEER PRESSURE SOCAL SUPPORT COMMUNICATION AND NEGOTIATION SKILLS ENVIRONMENTAL FACILITATORS |
| Intended Immediate Outcomes | REDUCE SEXUAL AND DRUG-RELATED HIGH RISK BEHAVIORS |
| Type | GLI |
| Setting | SHELTERS FOR RUNAWAY YOUTH STREET |
| Is this intervention currently being provided in your planning area? | NO |
| Rationale for selecting this intervention: | INCREASED ASSERTIVENESS AND COPING SKILLS INCREASED HIV/AIDS KNOWLEDGE INCREASED KNOWLEDGE OF AVAILABLE RESOURCES |

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 Tab 7 – Intervention Selection Form

Subpopulation: ALL SUBPOPULATIONS RANKING: H
 All Ages, HIV negative and positive individuals and their partners

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| Name of Intervention | HIV EDUCATION, TESTING AND COUNSELING (C-15) |
| Risk Behavior(s) | IDU AND SEX HIGH-RISK BEHAVIORS |
| Influencing Factor(s) or FIBs | GROUP PRESSURE PEER PRESSURE SELF-ESTEEM SOCIAL SUPPORT CULTURAL NORMS EXPECTED OUTCOMES ENVIRONMENTAL FACILITATION (ACCESS TO CONDOMS AND BLEACH KITS) |
| Intended Immediate Outcomes | INCREASE CONDOM USAGE WITH ALL PARTNERS PROVIDE HIV TESTING AND COUNSELING |
| Type | CLI, ILI |
| Setting | STD CLINIC, COMMUNITY VENUES |
| Is this intervention currently being provided in your planning area? | A MODIFIED VERSION IS BEING USED |
| Rationale for selecting this intervention: | PROVIDES TESTING AND COUNSELING TO INDIVIDUALS AT HIGH RISK FOR HIV |

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Subpopulation: IDU AFRICAN AMERICAN WOMEN FMS AFRICAN AMERICAN WOMEN
 FMS HISPANIC WOMEN FMS WHITE WOMEN
 FMS AFRICAN AMERICAN MEN FMS HISPANIC MEN
 FMS WHITE MEN
 All Ages, HIV negative and positive individuals and their partners

Ranking: H

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| Name of Intervention | Skills building (C-4) |
| Risk Behavior(s) | Sex without condoms |
| Influencing Factor(s) or FIBs | Self efficacy Intentions Group norms Peer pressure Social support Environmental facilities (access to condoms and bleach kits) |
| Intended Immediate Outcomes | Increase frequency of condom use |
| Type | GLI |
| Setting | Methadone maintenance clinics |
| Is this intervention currently being provided in your planning area? | No |
| Rationale for selecting this intervention: | High risk population identified by epi-data |

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Subpopulation: FMS HISPANIC WOMEN
 FMS AFRICAN AMERICAN WOMEN
 FMS WHITE WOMEN

RANKING: H

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|--|---|
| Name of Intervention | NOSOTRAS VIVIREMOS (We live) (Pg. 41-42 Fact sheet) |
| Risk Behavior(s) | Unprotected sex |
| Influencing Factor(s) or FIBs | Self efficacy Self esteem Communication and negotiation skills Expected outcomes Perceived susceptibility Social support Environmental barriers or facilitators Interpersonal power dynamics |
| Intended Immediate Outcomes | Increased condom usage To improve communication skills To increase knowledge of HIV/STD transmission and prevention |
| Type | GLI |
| Setting | Varies |
| Is this intervention currently being provided in your planning area? | No |
| Rationale for selecting this intervention: | Increased knowledge of reproductive health issues Improved communication skills Increased understanding of HIV/AIDS and STD'S Increased condom use |

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Subpopulation: FMS AFRICAN AMERICAN MEN FMS HISPANIC MEN
 FMS WHITE MEN FMS WHITE WOMEN
 FMS AFRICAN AMERICAN WOMEN FMS HISPANIC WOMEN

Ranking: H

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| Name of Intervention | ARREST PROGRAM AIDS RISK-REDUCTION EDUCATION AND SKILLS TRAINING ARREST PROGRAM (FACT SHEET PG –52) |
| Risk Behavior(s) | Risk-related sexual and drug use behaviors |
| Influencing Factor(s) or FIBs | Self esteem Self efficacy Peer pressure Illusions of invulnerability Communication and negotiation skills |
| Intended Immediate Outcomes | To increase HIV prevention knowledge and behavioral skills among adolescents |
| Type | GL |
| Setting | Community |
| Is this intervention currently being provided in your planning area? | No |
| Rationale for selecting this intervention: | To increase self esteem To increase communication and negotiation skills Increase assertiveness skills Increase proper condom usage and condom usage; in general |

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Subpopulation: MMS AFRICAN AMERICAN IDU AFRICAN AMERICAN WOMEN
 MMS HISPANIC IDU HISPANIC WOMEN
 MMS WHITE IDU WHITE WOMEN
 IDU AFRICAN AMERICAN MEN FMS AFRICAN AMERICAN MEN
 IDU HISPANIC MEN FMS AFRICAN AMERICAN WOMEN
 IDU WHITE MEN FMS HISPANIC WOMEN
 FMS WHITE WOMEN
 All Ages, HIV negative and positive individuals and their partners

RANKING: H

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| Name of Intervention | PROJECT RESPECT (C-11) |
| Risk Behavior(s) | UNPROTECTED SEX |
| Influencing Factor(s) or FIBs | SELF-ESTEEM SOCIAL SUPPORT RELATIONSHIP DEVELOPMENT COMMUNICATION/NEGOTIATION SKILLS PEER PRESSURE ATTITUDES GROUP NORMS PERCEIVED SUSCEPTIBILITY |
| Intended Immediate Outcomes | INCREASE CONDOM USAGE INCREASE TESTING |
| Type | GLI ILI (PREVENTION COUNSELING) |
| Setting | COMMUNITY CENTERS/STD CLINIC |
| Is this intervention currently being provided in your planning area? | PARTIAL |
| Rationale for selecting this intervention: | HIGH INCIDENCE OF UNPROTECTED SEX NOTED IN NEEDS ASSESSMENT DATA |

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Subpopulation: ALL SUBPOPULATIONS

Ranking: H

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| Name of Intervention | AIDS Education for Drug Abusers (C1-6) | |
| Risk Behavior(s) | IDU and sex related HIV risk behaviors | |
| Influencing Factor(s) or FIBs | Group pressure Peer pressure Social support Intentions Self-esteem | Cultural norms Expected outcomes Environmental facilitation (access to condoms and bleach kits) |
| Intended Immediate Outcomes | Increase condom use with main and non-main partners Increase disinfection of injection equipment | |
| Type | Community level intervention (CLI) | |
| Setting | Inpatient drug detoxification and rehabilitation center | |
| Is this intervention currently being provided in your planning area? | Yes | |
| Rationale for selecting this intervention: | High-risk population our area. Identified HIV+ individuals from these settings. | |

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Subpopulation: ALL SUBPOPULATIONS

Rankings: Same as the corresponding group in the selected HMAZ, LMAZ

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| Name of Intervention | Prevention Counseling/Partner Elicitation (PCPE) |
| Risk Behavior(s) | Substance use Sex without condoms Multiple partners |
| Influencing Factor(s) or FIBs | Perceived susceptibility Environmental facilitators (access to condoms and testing) Knowledge of STDs Group or Cultural Norms |
| Intended Immediate Outcomes | Increase proportion of HIV -infected persons who know their status Increase condom use Improve communication and negotiation skills Improve self perception of risk Provide access to condoms and testing Improve knowledge of STDs Reduce Number of sex partners |
| Type | Individual Level Intervention |
| Setting | Community based organization, STD clinics, other community-based locations |
| Currently provided? | Yes |
| Rationale for selecting intervention: | <p>Counseling, testing, referral and partner services have been recommended as an effective intervention for all populations in Texas. In the Centers for Disease Control and Prevention's <i>HIV Prevention Strategic Plan Through 2005</i>, Goal 2 is to increase the proportion of HIV-infected people in the U.S. who know they are infected through voluntary counseling and testing. The CDC's objectives to meeting this goal support the inclusion of this intervention for all populations. These objectives include: improving access to voluntary, client-centered counseling and testing in high seroprevalance populations and increasing the number of providers who provide voluntary, client-centered counseling and testing. The core elements of this intervention include risk assessment, risk reduction plan, and the option to test for HIV either anonymously or confidentially.</p> <p>The Texas CPGs recommend the following strategies to promote PCPE:</p> <ol style="list-style-type: none"> 1) Fact Sheet p. 31. <i>Culturally Tailored HIV/AIDS Risk-Reduction Messages Targeted to African-American Urban Women</i>. This 20-minute video increased the likelihood that women would view HIV as a personal risk, to request condoms, to talk with friends about AIDS, and to get tested for HIV. 2) Fact Sheet p. 34 <i>Context Framing to Enhance HIV Antibody Testing Messages Targeted to African-American Women</i>. This 25-minute video |

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| | <p>emphasizes the personal losses from not testing. Women were more likely to get tested and to talk to partners about testing after this video.</p> <p>3) Single session HIV/AIDS informational education: basic informational sessions discussing risks, correct condom and bleach kit use, referrals and the like enhance participants willingness to test either during or after the session.</p> <p>4) Bar outreach: sustained, consistent presence in a bar type setting enhances testing. The specific outreach that is known to work consisted of weekly presence in the bar, with an informational table, with staff present and interacting with bar managers, performers and patrons for 2-4 hours at a time. Testing was conducted at the bar or referral made to a community-based organization. Staff gained the trust of all through their sustained efforts.</p> <p style="text-align: right;">pcpe</p> |
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Area 5, Central Texas
HMAZ—South IH-35 Corridor
 Tab 7 – Intervention Selection Form

Subpopulation: All **high priority** subpopulations, consistent with CDC Guidance, September 1997

Rankings: Same as the corresponding group in the selected HMAZ, LMAZ

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| Name of Intervention | Prevention Case Management (PCM) |
| Risk Behavior(s) | Multiple high risk behaviors consistent with HIV Prevention Case Management Guidance, September 1997 by the CDC Substance use Sex without condoms Multiple partners |
| Influencing Factor(s) or FIBs | Perceived susceptibility Fatalism Self Efficacy Peer Pressure Cultural group norms |
| Intended Immediate Outcomes | Increase condom use Decrease number of partners Increase Self Esteem Referral for new HIV positives into Early Intervention Programs Referral of HIV positives into more intensive Intervention Programs that address the Factors Influencing the Risky Behavior. |
| Type | Individual Level Intervention |
| Setting | Community based organization, STD clinics, other locations |
| Currently provided? | No |
| Rationale for selecting intervention: | <p><i>This intervention should target only high-risk individuals, whether HIV-positive or HIV-negative, with multiple, complex problems and risk-reduction needs.</i></p> <p>This intensive, client-centered prevention activity has the fundamental goal of promoting the adoption and maintenance of HIV risk-reduction behaviors. It is suitable for individuals seeking stability and regularity in their lives and/or individuals who are reaching an action step in dealing with health concerns. PCM should include 1) client recruitment and engagement, 2) screening and assessment of HIV and STD risks and medical and psychosocial service needs, 3) development of a client-centered prevention plan, 4) multiple session HIV risk-reduction counseling, 5) active coordination of services with follow-up, 6) monitoring and reassessment of client's needs, risks, and progress, and 7) discharge from PCM services upon attainment and maintenance of risk-reduction goals.</p> <p style="text-align: right;">pcm</p> |